Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column								SMALL TYPE	EN	ITITY	OR	OTHER SMALL E	
TOTAL CLAIMS			6				ľ	RATE		FEE	[RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		İ	BASIC F	EE	370.00	OR	BASIC FEE	890
TOTAL CHARGEABLE CLAIMS			@ minus 20=		*		j	X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*			X42=			OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT	ESENT 1				+140=			OR	+280=	-
* If the difference in column 1 is less than zero, enter						olumn 2	1	TOTA	ᅴ		OR	TOTAL	890
	CI		1		<u></u>		OTHER	-					
(Column 1) (Column 2) (Column							۱ -	SMAL	L E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING NU AFTER PREV		NUM	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	* 9	Minus	** /	10	-		X\$ 9=	= [OR	X\$18=	
AME	Independent	* 2	Minus	*** (3	=		X42=			OR	X84=	
ப்	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	=.		OR	+280=	
			1	TOT ADDIT. F			OR	TOTAL ADDIT. FEE					
		(Column 1)			mn 2)	(Column 3)		۱۱۰۲ است.	I		- -		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=	= [OR	X\$18=	
AME	Independent	*	Minus	***	F 01 4	=	 	X42=			OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	_		OR	+280=	
									AL		4 1	TOTAL ADDIT. FEE	
			ADDIT. F	ct i		•	ADUII. FEE.						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	MN 2) HEST MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	֡֞֞֞֞֞֞֞֞֞֞֞֞֞֓֓֓֞֞֓֓֡֓֞֓֓֡֓֡֓֡֓֡֡֡	X\$ 9=	= [OR	X\$18=	
4ME	Independent	*	Minus	***		=		X42=			OR	X84=	
Ľ	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┇┪	<u> </u>		+280=	<u> </u>
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	<u> </u>
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
505	1970						Dot	ant and Tr	odon	and Office II	e ne	PARTMENT O	COMMERCI

Application or Docket Number